PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional)
	KSN0007

In re Application of	
Tom Blomme et al.	

Application Number	Filed
09/701,349	**November 28, 2000**

For	
RF CONNECTOR WITH CUTTING EDGES	

Group Art Unit	Examiner

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

☐ One month (37 CFR 1.17(a)(1)) $_____

☐ Two months (37 CFR 1.17(a)(2)) $_____

☐ Three months (37 CFR 1.17(a)(3)) $_____

☒ Four months (37 CFR 1.17(a)(4)) $_____1,440___

☐ Five months (37 CFR 1.17(a)(5)) $_____

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: $ _____ .

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-0387 _____ .
I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

    ☐ assignee of record of the entire interest. See 37 CFR 3.71.
        Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

    ☒ attorney or agent of record.

    ☒ attorney or agent under 37 CFR 1.34(a).
        Registration number if acting under 37 CFR 1.34(a) _32,230_ .

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

March 18, 2002
Date

04/04/2002 UEDUVIJE 00000155 09701349
01 FC:118   1440.00 OP

Signature

Eric J. Groen
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.